

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Title:: METHOD FOR THE SECURE AND TIMELY  
DELIVERY OF LARGE MESSAGES OVER A  
DISTRIBUTED COMMUNICATION NETWORK

Attorney Docket Number:: 020581-000500US

Request for Early Publication:: No

Request for Non-Publication:: No

Total Drawing Sheets:: 2

Small Entity?: Yes

Petition included?: No

Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: India

Status:: Full Capacity

Given Name:: Viral

Middle Name::

Family Name:: Kadakia

City of Residence:: Sunnyvale

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 978 Wisteria Terrace

City of Mailing Address:: Sunnyvale

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94086

Applicant Authority Type:: Inventor  
 Primary Citizenship Country:: India  
 Status:: Full Capacity  
 Given Name:: Ramakrishna  
 Middle Name::  
 Family Name:: Chinta  
 City of Residence:: Sunnyvale  
 State or Province of Residence:: CA  
 Country of Residence:: US  
 Street of Mailing Address:: 874 Flin Way  
 City of Mailing Address:: Sunnyvale  
 State or Province of mailing address:: CA  
 Country of mailing address:: US  
 Postal or Zip Code of mailing address:: 94087

Applicant Authority Type:: Inventor  
 Primary Citizenship Country:: US  
 Status:: Full Capacity  
 Given Name:: Randy  
 Middle Name::  
 Family Name:: Menna  
 City of Residence:: San Jose  
 State or Province of Residence:: CA  
 Country of Residence:: US  
 Street of Mailing Address:: 1448 Newport Avenue  
 City of Mailing Address:: San Jose  
 State or Province of mailing address:: CA  
 Country of mailing address:: US  
 Postal or Zip Code of mailing address:: 95125

**Correspondence Information**

Correspondence Customer Number:: 20350

**Representative Information**

Representative Customer Number::

**Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

**Foreign Priority Information**

Country:: Application number:: Filing Date::

**Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::